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 _

Application or Docket Number

Effective October 1, 2000									1451-	7	14 C	c5
. CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			50					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			$\leq \mathcal{U}$ min	us 20=	* - 4	30		X\$ 9=		OR	X\$18=	540.90
IND	EPENDENT CL	AIMS	7 mii	nus 3 =	*	4		X40=		OR	X80=	320.00
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT							.070	20.00	
* If the difference in column 1 is less than zero, enter "0" in column 2								+135=		OR	+270=	
						TOTAL			OR	TOTAL OTHER	157000	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2)						(Column 3)	S	MALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT				PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN.	T CLAIM			-135=		OR	+270=	
							L	TOTAL		OB	TOTAL	
(Column 1) (Column 2) (Column 3)							AD	DIT. FEE		JOH	ADDIT. FEE	L
AENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		H!GI NUN PREVI	HEST MBER IOUSLY O FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent		Minus	***	T CL AIA	=		X40=		OR	X80=	
<u> </u>	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	I CLAIM		, [+135=		OR	+270=	
							AD	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			ımn 2)	(Column 3)	•					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=	┧┞	X40=		OR	X80=	
Ĺ	FIRST PRESE	ENTATION OF M	IULTIPLE DE	PENDEN	IT CLAIM		」 -	+135=		OR	+270=	
•	If the entry in colu	ımn 1 is less than	the entry in col	umn 2, wri	te "0" in co	olumn 3.		TOTAL	 		TOTAL	

ADDIT, FEE

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.